

## PN HESI EXIT REAL EXAM WITH COMPLETE QUESTIONS AND CORRECT ANSWERS 2023 - 2024

- The practical nurse (PN) is observing a client self-administering a dose of subcutaneous insulin. What step of the injection technique should the practical nurse (PN) reteach?
  - a. Injects air into the insulin vial to displace the dose
  - b. Selects the same site that was used for the previous injection**
  - c. Inserts the needle at a 90-degree angle to the skin surface
  - d. Uses a circular motion when applying an alcohol pad to the site

**Rationale: The PN should reteach the client to rotate the NOON site to a site other than the same one used for the AM dose. Different sites used throughout the day may provide a varying rate of absorption related to activity. Intra-site rotation is recommended for the dose used during one specific time of the day. The other choices are acceptable techniques for subcutaneous injection of insulin.**



- The practical nurse (PN) observes a newly hired unlicensed assistive Personnel (UAP) who is counting a client's radial pulse as seen in the

picture. Which action should the PN take?

- a. Confirm accuracy of the pulse rate obtained by the UAP
- b. Instruct the UAP to report any abnormal findings
- c. Remind the UAP to check the client's pulse volume
- d. **Demonstrate the correct pulse site to the UAP (follow the thumb for the radial pulse, follow the pinky for the brachial)**

**Rationale: When checking the radial pulse, the index and middle finger should be aligned with the thumb, for brachial pulse assessment should be aligned with the pinky finger.**

- The birth weight of an infant delivered by a woman with gestational diabetes is 10.1 pounds (4,581 grams). The infant is jittery and has a heel stick glucose level of 40 mg/dL (2.2 mmol/L or SI units) 30 minutes after birth. Based on this information, which intervention should the practical nurse (PN) implement first?
  - a. Repeat the heel stick for glucose in one hour
  - b. Offer nipple feedings of 10% dextrose
  - c. **Begin frequent feedings of breast milk or formula**
  - d. Assess for signs of hypocalcemia

**Rationale: Providing frequent feedings will reduce the infant's blood glucose; we wouldn't want to obtain another heel stick as we want to do less invasive as possible.**

- A client consumes 8 ounces (oz) of broth, 4 oz of apple juice, 4 ounces of flavored gelatin and 1 banana. During the same shift, this client receives 1 liter of IV fluid and voids 700 mL. How many mL total oral and IV intake should the PN document on the client's medical record? (Enter numeric value only).

$$8 \text{ oz} \times 30 \text{ mL} = 240 \text{ mL}$$

$$4 \text{ oz} \times 30 \text{ mL} = 120 \text{ mL}$$

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$$1 \text{ L} = 1000 \text{ mL}$$

**Total intake = 1480 mL**

- The nurse is very busy and running late with administering medications and asks the practical nurse (PN) to administer a medication already drawn up in an unlabeled syringe. How should the PN respond?
  - a. "You should know that I cannot administer the medication in this syringe"
  - b. "As long as the charge nurse checks the syringe, I can give the medication"
  - c. "Teamwork is the best approach. I will be glad to help you get caught up"
  - d. **"I am not comfortable doing that. Is there something else I can do to help you?"**

**Rationale: Explaining your comfortability is always okay because you don't want to jeopardize your license, so offering to help with the nurse's other workload is being. A team player.**

- The practical nurse (PN) is assigning care for a group of clients on the

urology medical unit. Which client should the PN assign to the unlicensed assistive personnel (UAP)? (Select all that apply.)

- a. Irrigate an indwelling urinary catheter for a client with bladder suspension
- b. Obtain a post-voided residual (PVR) volume
- c. **Empty bedside drainage unit for a client with indwelling urinary catheter**
- d. Teach the client with fluid restrictions how to measure urine output
- e. **Transport a urine culture sample to the laboratory**

**Rationale: The scope of practice of UAP includes personal care such as bowel and bladder care including intake and output measurements. Emptying urine from bedside drainage units and transporting specimens are tasks that can be assigned to the UAP.**

- Which intervention should the practical nurse (PN) reinforce for a client with pruritis?
  - a. Encourage a warm sleeping environment
  - b. Do not take any type of tub bath
  - c. Discourage use of skin lubricants
  - d. **Keep fingernails trimmed short**

**Rationale: Keeping fingernails short with rough edges filed helps minimize excoriation from scratching the pruritic (itch) area.**

- While administering prescription medications to an older resident in an extended care facility, the practical nurse (PN) notices that the client is

having difficulty hearing. What action is **most** important for the PN to take?

- a. Speak louder so the client can hear the conversation
- b. Encourage the client to read the practical nurse's lips
- c. Provide written instructions about how to take medications
- d. **Determine if the client has had difficulty in the past**

**Rationale: In the older population, presbycusis is common and results from degenerative changes in the ear with aging and is often a gradual progressive, bilateral inability to hear, especially high frequency sounds. Most importantly, the PN should determine if the client's hearing problem is new or gradual, chronic condition.**

- The healthcare provider prescribes cefazolin 500 mg IM every 6 hours. The available vial is labeled, "Cefazolin 1 gram," and the instructions for reconstitution state, "For IM use, add 2.5 mL sterile water for injection to provide a total volume of 3.0 mL." After reconstitution, how many mL should be administered to the client? (enter numeric value only. If rounding is required, round to the nearest tenth.)

**1.3 mL**

**Rationale: 1 g = 1000 mg; 500 mg / 1000 = 0.5; 0.5 x 2.5 mL = 1.25 rounded to nearest tenth = 1.3 mL**

- In caring for a client with Buck's traction, the practical nurse (PN) observes that the prescribed amount weights are hanging freely, and the traction rope is on the pulley. Which action should the PN implement first?
  - a. Adjust the traction rope so it is free from the pulley
  - b. Place the weights on blocks to increase their stability
  - c. Contact the orthopedic technician to adjust the traction
  - d. **Document that the Buck's traction is being maintained**

**Rationale: Weights that hang freely with ropes in the pulleys indicate the traction is correctly applied. The PN should document the Buck's traction is being maintained.**

- When a small fire breaks out in the kitchen of a long-term care facility, which task is most important for the practical nurse (PN) to perform **instead** of assigning to a unlicensed assistive personnel?
  - a. Provide blankets to each of the residents for use during evacuation
  - b. **Identify the method for transporting and evacuating each resident**
  - c. Close the doors to all of the residents' rooms
  - d. Offer comfort care and reassurance to each resident
- The practical nurse (PN) is caring for a client with coronary artery disease who is admitted with intermittent chest pain. The admission laboratory results indicate elevations in troponin I and creatine phosphokinase



myoglobin isoenzyme (CK-MB) levels. What should the PN consider the **most** significant risk for this client on the second day of admission?

- a. **The lab results indicate myocardial damage, and the client is at risk for cardiac dysrhythmias**
- b. The client is at risk for recurrent long-term angina pain and subsequent myocardial infarction
- c. The client is at risk for pulmonary embolism, and lifestyle modifications need to be implemented
- d. The lab results indicate risk factors for transient ischemic attack (TIA), and neuro-vital signs should be monitored

**Rationale: Elevations in serum troponin 1 and CK-MB indicate myocardial cell damage which cause an instability of the myocardial cell membrane and can precipitate life-threatening cardiac dysrhythmias that increase in the first 24-48 hours after a MI. Although the client's underlying pathology places the client at risk for other complications, the incidence of dysrhythmias in the immediate post-MI period is greatest.**

- The practical nurse (PN) observes hematuria in the urinary catheter drainage tubing of a client who is receiving intravenous heparin. Which action should the PN implement first?
  - a. Obtain a urine specimen for urinalysis
  - b. **Check the client's gums for bleeding**
  - c. Document the finding in the client's medical record
  - d. Irrigate the urinary catheter with sterile normal saline
- The practical nurse (PN) explains the 2-week dosage prescription of prednisone to a client who has poison ivy covering multiple skin surfaces.

What should the PN emphasize about the dosing schedule?

- a. Take the prednisone with meals
  - b. Monitor oral temperature daily
  - c. Return for blood glucose monitoring in one week
  - d. **Decrease dosage daily as prescribed**
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- A client is receiving an anticonvulsant, diazepam, intravenously for status epilepticus. Which intervention is most important for the practical nurse (PN) to implement?
    - a. **Monitor the client's respiratory rate and effort**
    - b. Observe the clients' eyes for deviation to the side
    - c. Record hourly blood pressures for the next 4 hours
    - d. Measure hourly urinary output for the next 8 hours
  
  - The practical nurse (PN) administers filgrastim to a client with neutropenia. The client later complains of bone pain. Which action should the PN take?
    - a. Reassure the client that neutropenia often causes bone pain
    - b. Plan to administer the next dose at an alternate injection site
    - c. **Offer to administer a prescribed PRN analgesic to the client**
    - d. Prepare a variance report about the onset of pain after injection

**Rationale: Medullary bone pain is a side effect of filgrastim, and the PN should**

**offer to administer an analgesic to provide pain relief.**

- The practical nurse (PN) is caring for a client who has been taking nonsteroidal anti-inflammatory drug ibuprofen for arthritic pain. Which action will the PN include in this client plan of care?
  - a. Give the medication on an empty stomach
  - b. Observe for signs of gastrointestinal bleeding**
  - c. Encourage the client to wear sunblock when outside
  - d. Monitor the blood pressure frequently

**Rationale: A common side effect of NSAIDs is gastrointestinal (GI) distress. The PN should observe for any signs of GI bleeding, and these should be reported immediately, and the client should quit taking the medication.**

- The practical nurse (PN) reviews instructions for use of polyethylene glycol, a laxative, with a client scheduled for a colonoscopy. Which instruction should the PN include?
  - a. Report the onset of watery diarrhea to the healthcare provider
  - b. Dilute the liquid medication with fruit juice to mask the flavor
  - c. Drink each glass of solution rapidly at regular specified time intervals**
  - d. Drink the solution with the evening meal before the scheduled exam

**Rationale: to produce the best effect, the client should be instructed to drink each glass (240ml) of polyethylene glycol solution rapidly and at regular intervals**

- The practical nurse (PN) notifies the healthcare provider about client information using Situation, Background, Assessment, Recommendation (SBAR) technique. Which information should the PN provide first?
  - a. A 26-year-old client
  - b. Intravenous fluids infusing at 75 mL/hr
  - c. **Blood pressure is 80/48 mmHg**
  - d. Cholecystectomy 24 hours ago
  
- In administering nystatin suspension to the gums of an infant with candida infection, which approach should the practical nurse (PN) use?
  - a. Irrigate the infected area medicated solution after applying sterile gloves
  - b. **Draw up the medication in a needle-less syringe which the infant can suck**
  - c. Use a gloved finger to rub the suspension over the infected area
  - d. Measure the prescribed amount of solution into the infant's bottle
  
- When obtaining a capillary blood sample for glucose measurement, which interventions should the practical nurse (PN) implement?
  - a. Grasp the subcutaneous tissue and pull upward
  - b. Remove any nail polish from the fingernails
  - c. **Determine which finger was used previously**
  - d. Apply a tourniquet above the antecubital fossa

**Rationale: Using another site than a previously accessed finger pad reduces repeated trauma to the tissue and capillary supply in the distal finger where the blood sample is taken.**

- The practical nurse (PN) is assisting a client to cough and deep breathe following surgery. To facilitate effective coughing, the PN should assist the client to assume which position?
  - a. Lying prone with the head turned to one side
  - b. Leaning forward over the bedside table
  - c. Left-lateral with pillow between flexed knees
  - d. **Sitting on the side of bed with feet flat on the floor**

**Rationale: Sitting upright facilitates diaphragm excursion and enhances thoracic and abdominal expansion.**

- An older female adult who was admitted to a long-term care facility yesterday is confused about what day of the week it is. Her history does not indicate that she was confused prior to admission. What action should the practical nurse (PN) take?
  - a. **Remind the client what day of the week it is**
  - b. Document the client's loss of memory in the record
  - c. Notify the family of the changes in the client's condition
  - d. Encourage the client to rest during the day

**Rationale: Relocation often results in confusion among elderly clients during times of adjustment to new surroundings. The PN should remind the client which day of the week it is when she forgets or becomes confused. The other actions are not indicated at this time for relocation or stress.**

- The practical nurse (PN) learns that a client who is receiving chemotherapy has developed stomatitis. Which information should the PN obtain from the client during a focused assessment?
  - a. Frequency of bowel movements
  - b. Blood pressure while standing
  - c. **Ability to swallow**
  - d. Urinary output

**Rationale: Stomatitis or inflammation of the oral mucosa can cause pain and result in difficulty in swallowing. The PN should gather information related to the client's ability to swallow.**

- The practical nurse (PN) is assigned to care for a client who had an endoscopic procedure in which the local anesthetic was sprayed on the throat. Which priority actions should the PN include in the client's plan of care?
  - a. Instruct the client to speak
  - b. Inquire about a sore throat
  - c. Observe for belching
  - d. **Assess the gag reflex**

- A client receives ondansetron prior to a chemotherapy treatment. How should the practical nurse evaluate the effectiveness of the medication?
  - a. Determine if the client feels calm and relaxed before the treatment
  - b. Monitor the client for nausea and vomiting following the treatment**
  - c. Observe the client for signs of pain or discomfort during the treatment
  - d. Assess for changes in vital signs during and after the treatment

**Rationale: Ondansetron is an antiemetic administered prior to chemotherapy to prevent post-treatment nausea and vomiting. The other actions do not evaluate the desired effect of ondansetron.**

- When gathering data about a client with dark skin tones, which site should the practical nurse (PN) observe?
  - a. Finger and toenails
  - b. Sclera and mucous membranes**
  - c. Forehead and face
  - d. Hands and feet
  
- An older client who had a colon resection 8 days ago is straining at stool. The practical nurse (PN) observes sudden spillage of serosanguinous drainage from the client's wound followed by appearance of bowel on the skin. Which complication has occurred?



- a. **Evisceration**
- b. Dehiscence
- c. Hemorrhage
- d. Infection

**Rationale: Evisceration is the complete separation of a wound with protrusion of the viscera, which usually occurs 7-10 days postoperatively.**

- A client who is being cared for in her home has a low serum sodium level of 125 mEq/L. To determine the cause of this value, which information should the practical nurse (PN) request from the client?
  - a. The amount of salt substitute used in meal preparation
  - b. The number of vegetable servings consumed daily
  - c. The percent of processed or canned foods eaten
  - d. **The amount of ice chips and water consumed daily**

**Rationale: An excessively low serum sodium level (normal 135-145) may be the result of water intoxication. The PN should evaluate the client's daily consumption of ice or water.**

- A new protocol for fall prevention is being implemented on the medical unit. During safety rounds, the practical nurse (PN) identifies that unlicensed assistive personnel (UAP) has omitted a vital component of the protocol. After implementing the missing component, which action should the PN take?
  - a. **Supervise the UAP after reviewing the protocol**
  - b. Report the UAP's omission to the charge nurse
  - c. Complete an unusual occurrence report
  - d. Assign the UAP to more stable clients the next day
  
- Which intervention is within the scope of practice for a practical nurse (PN)?
  - a. Discharge teaching about newly prescribed medications
  - b. Presenting support options that are available to those with cancer
  - c. Teaching the use of a glucometer to a newly diagnosed diabetic client
  - d. **Demonstrating deep breathing and coughing to a postoperative client**
  
- An older postoperative client has the nursing diagnosis, "Impaired mobility related to fear of falling." Which desired outcome best directs the practical nurse (PN) actions for this client?
  - a. **The PN will place a gait belt on the client prior to ambulation.**
  - b. The physical therapist will instruct the client in the use of a walker
  - c. The client will use self-affirmation statements to decrease fear
  - d. The client will ambulate with assistance q4 hours

- The practical nurse (PN) is working in a cancer detection mobile clinic. Four individuals come for screening with a complaint of hoarseness, a danger sign for cancer of the larynx. Which client has the highest risk for development of cancer of the larynx that the PN should refer to the healthcare provider?
  - a. An office manager whose mother has laryngeal cancer
  - b. A farmer who smokes a half pack of cigarettes daily
  - c. An older male who drinks a six pack of beer nightly and smokes heavily**
  - d. An opera singer who does not smoke but drinks a glass of wine each day

**Rationale: Cancer of the larynx is more prevalent in older males who smoke and drink in excess which increases the risk for this cancer.**

- A male preoperative client who has already signed the informed consent for a surgical procedure confides to the practical nurse (PN) that he is really frightened and unsure about undergoing the surgery. Which priority action should the PN take?
  - a. Remind the client that the consent has already been obtained

- b. Document that the client has expressed concerns about the surgery
- c. **Notify the charge nurse of the client's concerns about surgery**
- d. Encourage the client to continue with the scheduled surgery

- An older client tells the home health care practical nurse (PN) about experiencing dizziness when getting out of bed. Which assessment is most important for the PN to obtain?

- a. **Standing blood pressure**
- b. Oxygen saturation
- c. Apical heart rate
- d. Pulse deficit

- The practical nurse (PN) asks an unlicensed assistive personnel (UAP) for feedback about an assigned client. Instead of responding, the UAP walks away from the PN, ignoring the question. What action is best for the PN to take?

- a. **Approach the UAP to discuss the behavior and obtain the information needed about the client**
- b. Recognize that the UAP may be upset and ask someone else for the information
- c. Submit an occurrence report identifying the UAP's lack of motivation to perform assigned job tasks
- d. In a private setting, ask the other nurses for feedback about the UAP's behavior